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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/750,530
Filing Date	12/28/2000
First Named Inventor	KHOO
Group Art Unit	2611
Examiner Name	SALCE, Jason P.
Attorney Docket Number	IND-105

Total Number of Pages in This Sub	mission Attorney Docket Number	r IND-105		
ENCLOSURES (check all that apply)				
Fee Transmittal Form Fee Attached Amendment / Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Assignment Papers (for an Application) Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Remarks	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below): RECEIVED AUG 2 1 2003 Technology Center 260		
SIGNA	TURE OF APPLICANT, ATTORNEY, OR	AGENT		
Firm or Individual name PILLSBURY WINTHROP LLP Signature Date 08/12/2003				
	CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: August 12, 2003				
Typed or printed name Steven J. M	Moore (Reg. No. 35,959)			
Signature	Joo Date	e 08/12/2003		

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PTO/SB/17 (05-03)

Approved for use through 04/30/2003. OMB 0651-0032

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Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

C	omplete if Known		
Application Number	09/750,530		
Filing Date	December 28, 200	®RECEIVE	
First Named Inventor	кноо	RECEIVE	U
Examiner Name	SALCE, Jason P.	AUG 2 1 200	ł
Art Unit	2611		ļ
Attorney Docket No.	IND-105	Technology Center	2600

Check	METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)
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The Director is authorized to: (check all that apply) Charge fee(s) indicated below. Charge fee(s) indicated below with pendency of this application Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. 1805 1,840* 1805 1,8	Account Pilisbury Winthrop	1052 50	
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SUBMITTED BY

Name (Print/Type)

Steven J. Moore

Registration No. (Attorney/Agent)

Signature

(Complete (if applicable)

Telephone 203-965-8254

Date August 12, 2003

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